

# Provincial Human Services and Justice Coordinating Committee

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2023-2024 Pre-Budget Submission  
to the Minister of Finance



## Our Network

Ontario's [Human Services and Justice Coordinating Committee \(HSJCC\) Network](#) is a cooperative effort of the Ministries of Health, the Attorney General, Children, Community and Social Services, and the Solicitor General. Our priority consideration is for individuals with complex human service needs which may include but are not limited to those living with mental health issues, substance use concerns and/or behavioural dependencies, or neurodevelopmental and neurocognitive disabilities including developmental disabilities and dual diagnosis.

Our network includes over 1500 members across Ontario. Each HSJCC is a voluntary collaboration between social service organizations, Black, Indigenous and racialized led organizations, mental health and addictions organizations and partners from the justice sector, including police services, legal aid, Crown attorneys and correctional and probation officers. There are 14 Regional HSJCCs who provide education and training to their members, and work to address regional change initiatives. There are 39 Local HSJCCs who focus on education and training, while also coordinating care for justice-involved individuals in their communities and provide input to regional committees.

Our network affirms the importance of a coordinated, cross-sectoral approach to address issues affecting Ontarians in conflict with the law and its effective means of reducing criminalization across the province. We remain committed to providing essential supports to communities that face multiple barriers to accessing health care.

The [Provincial HSJCC \(P-HSJCC\)](#) functions as a planning body, providing support and leadership to the individual and collective efforts of the Local and Regional HSJCCs. The P-HSJCC is supported by the HSJCC Secretariat, which is housed at the Canadian Mental Health Association, Ontario. Established in 2015, with funding made available by the Ministry of Health, the Secretariat has supported a considerable expansion of the work of the HSJCC Network by coordinating province-wide projects, providing overall project management, strategic policy advice and analysis and assistance with member engagement support. The Secretariat also assists with education and knowledge exchange activities, including educational webinars, newsletters, and informational guides, which are all made publicly available on the HSJCC [website](#).



# Our Membership





## Our Achievements

The P-HSJCC regularly engages our members through surveys, consultations, webinars and virtual meetings to determine priorities, which are outlined in our [annual reporting webinars](#). With the support of the P-HSJCC and Secretariat Staff, our Network has been able to markedly increase the scope of our achievements. The P-HSJCC has also been able to respond quickly to emerging province-wide issues, key concerns and needs identified by our Network, particularly during the pandemic. We have shared these concerns and proposed solutions in regular submissions to government. Our priorities of focus for 2022-2025 include the expansion of resources and funding for our network, issues for specialized populations including Black and Indigenous populations and youth, expansion of crisis response, addressing substance use issues, cross-sector collaboration and cooperation issues, improve member engagement and clients with complex needs.

This year, the P-HSJCC have delivered on these priorities in several ways. In May 2022, the P-HSJCC entered into an agreement with the Ministry of the Solicitor General to support the development and operationalization of Community Reintegration Planning Tables. The P-HSJCC has leveraged its wide-ranging expertise, community and human services partnerships and existing regional and local tables to develop and implement the planning tables. These tables will support a person-centered, collaborative, multidisciplinary and multisectoral approach to release planning for high needs individuals. A Community Advisory Committee has also been established to enhance ministry and community collaboration on the development of the planning tables. Planning Tables were established at designated sites using a phased approach beginning in November 2022. Initial tables will monitor and assess results from the first five sites to apply lessons learned to inform the implementation of additional sites. The P-HSJCC is proud to complete this crucial work to support discharge planning for high-needs and high-risk individuals being released from custody.



In 2022-2023, the P-HSJCC has also supported the development and preparations for the launch of Mobile Crisis Response Teams: A Framework for Ontario and a complementary toolkit Tools for Developing Mobile Crisis Response Teams in Ontario. These documents form a new framework for crisis response in Ontario and are meant to build off [Improving Police-Hospital Transitions: A Framework for Ontario](#), a resource developed by the P-HSJCC and endorsed by the Ministry of Health and the Ministry of the Solicitor General in 2019. In the coming months, the P-HSJCC will also provide support for knowledge exchange events related to these resources, including by hosting a webinar on the Framework and Toolkit for our members, staff from CMHA branches and other stakeholders in the community mental health and addictions and community justice sectors.

In addition to the initiatives included in our 2022-2025 workplan, the P-HSJCC leads several provincial working groups and policy projects that have produced important public policy resources and knowledge exchange products, such as [navigational guides and reports](#), [webinars](#), and [newsletters](#).

The P-HSJCC continues to convene standing committees and a Community of Practice in response to issues that emerged through the COVID-19 pandemic and remain with us today. These include a community of practice which addresses release from custody issues, a standing committee that addresses anti-racism within the human services and justice sectors and a standing committee to improve the engagement of people with lived experience across the HSJCC Network. The committees have provided an opportunity for members to share information, address common issues and generate system solutions to improve client outcomes.



# Our Requests

1

## INCREASED BASE FUNDING FOR COMMUNITY HUMAN SERVICE AND JUSTICE SECTOR ORGANIZATIONS

The COVID-19 pandemic brought about unprecedented challenges for the health, human services, and justice sectors. Agencies serving individuals with complex human service needs who interact with the justice system continued to be nimble and creative in ensuring that they offer services to the most vulnerable populations. However, these agencies are facing unprecedented demand for services, with limited resources to support them. The mental health and addictions needs of Ontarians have risen and increased in complexity.

In February 2022, CMHA Ontario conducted a survey of Ontarians to assess the need for mental health services two years into the pandemic. This survey indicated that more Ontarians accessed mental health supports than at any other time during the pandemic. One in four people (24%) who responded indicated that they had sought help for their mental health challenges, up from 9% in 2020<sup>1</sup>. Further, 43% of people indicated that they found it difficult to access mental health supports, an increase of 7% since the beginning of the pandemic in March 2020<sup>2</sup>. Of those who did access mental health supports, around 65% reported that those supports were helpful, down from 77% at the beginning of the pandemic, which suggests a greater complexity in needs for mental health services. In February 2022, roughly one quarter of Ontarians reported that they were consuming more substances like alcohol, cannabis, or tobacco. The outlook on consumption of these substances had not improved from the previous year, where roughly the same percentage had increased consumption of alcohol, cannabis, or tobacco.

As these results reflect, members of the HSJCC Network are reporting a greater volume of cases with increasing complexity which require more time, resources and supports to help address. Agencies in the community justice and community mental health and addictions sectors cannot continue to meet the demand for service with existing resources, particularly at a time when inflationary costs have risen. The community justice and community mental health and addictions sectors have long been underfunded, with the needs emerging during the pandemic illustrating challenges that the sector has faced for decades. The lack of annualized operational funding impacts organizations' ability to recruit and retain qualified staff. As a result, it has become more and more difficult for community mental health and community justice organizations to deliver quality services, which in turn drives longer waitlists and greater risk of staff burnout.

1 Canadian Mental Health Association. (February 2022). Release: More Ontarians accessing pandemic mental health supports. Online: <https://ontario.cmha.ca/news/1-in-4-ontarians-access-mental-health-help-the-highest-rate-during-the-pandemic/>.

2 Ibid

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The financial challenges that organizations in the community justice and community mental health sectors have faced have been the subject of recent comment in submissions to government, as well as in media. For example, during a recent pre-budget consultation, the CMHA Kenora branch illustrated the challenges that the sector is facing. It was noted that CMHA Kenora has received a 2% base budget increase over 22 years, while inflation has risen 24% since 2014<sup>3</sup>. This is similar to many other community organizations across our sector.

Within the 2020-2021 health budget, funding for allocated to community based mental health and addiction care accounted for less than 3%. Community mental health and addictions agencies and community justice agencies including members of the HSJCC Network have demonstrated their ability to deliver high-quality services in some of the most challenging of circumstances. However, they cannot continue to do so while facing increasing costs and historical underfunding.

## 2 INCREASE SUPPORTIVE HOUSING SUPPLY

Improving supportive housing for justice-involved individuals with mental health and substance use issues has been a longstanding priority for the HSJCC Network<sup>4</sup>. There are numerous reports that outline the relationship between the social determinants of health such as housing, mental health issues, and justice-involvement and cycles of poverty, homelessness, and incarceration. The broader social determinants of health<sup>5</sup> can also reinforce these issues since poverty and social inequality can create or exacerbate housing instability, mental health and substance use issues, and therefore the risk of justice-involvement. Supportive housing is an essential way to interrupt the cycle between mental health issues, justice involvement and homelessness. Providing access to housing with supports plays a preventative and recovery role. Supportive housing<sup>6</sup> also has wider economic benefits across a series of systems, including the healthcare, social services and justice sectors. Every \$10 invested in supportive housing results in an average savings of \$21.71 in areas such as reduced hospitalizations and interactions with the justice system<sup>7</sup>.

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- 3 Shih, Eric. Fort Frances Times. (January 2023). Mental health group in Kenora struggling to keep pace. Online: [‘This needs to change’: Kenora CMHA branch calls for more funding - Fort Frances Times \(fftimes.com\)](https://fftimes.com).
- 4 HSJCC Network engagement and recommendations on improving supportive housing for justice-involved individuals with mental health and substance use issues were included in the Provincial HSJCC’s Housing and Justice Report (February 2020). Online: [HSJCC\\_Housing-Justice-Report\\_EN-updated.pdf](#).
- 5 The social determinants of health are conditions in the environments where people, live, learn, and work that affect a wide range of health risks and outcomes.
- 6 Supportive housing generally refers to individuals living independently in the community who may need on-or-off-site supports. Supports include clinical mental health and substance use services (i.e. case management, assertive community treatment, etc.) and social supports (i.e. employment, peer support, and life skills training, etc.).
- 7 Goering, Paula, et al. (2014). National Final Report. Cross-site at Home/ Chez-Soi Project. Mental Health Commission of Canada. Online: [mhcc\\_at\\_home\\_report\\_national\\_cross-site\\_eng\\_2\\_0.pdf \(mentalhealthcommission.ca\)](#)

People that are experiencing mental health challenges and have previous involvement in the justice system face severe barriers to accessing supportive housing. While there are a number of initiatives that currently offer vouchers for supportive housing, or that provide clinical mental health and addictions services for individuals in supportive housing, there is a critical need for greater housing supply.

The number of people on waitlists for supportive housing in Ontario is growing and the demand for supportive housing has long outpaced supply. The current shortfall of supportive housing has a disproportionate impact on individuals discharged from custody facilities and courts, since this population is often discharged without a fixed address. Experts have consistently identified the immediate need for 30,000 new supportive housing units across Ontario<sup>8</sup>. The P-HSJCC welcomes recent announcements of the construction of more affordable housing in cities across the province<sup>9</sup>. However, more is needed, particularly given the stigma and discrimination that people with complex needs face when obtaining appropriate housing. Community service providers have consistently reported that landlords may discriminate against people with complex needs for reasons such as having criminal records, showing past patterns of disruptive behavior, having multiple complex social and healthcare needs, and having inconsistent tenancy histories. Addressing the need for additional supportive housing stock for individuals with complex needs requires a targeted and coordinated approach. Reserving a minimum of 10% of new units of supportive housing for justice-involved individuals would be an important step forward in supporting the HSJCC's priority populations.



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8 Ontario Mental Health and Addiction Leadership Advisory Council. (2016). Mental health and addictions. Moving forward: Better Mental Health means better health.

9 Canadian Mortgage and Housing Corporation. (November 2022). Canada and Ontario make major housing announcement in Ottawa. Online: [Canada and Ontario make major housing announcement in Ottawa | CMHC \(cmhc-schl.gc.ca\).](https://www.cmhc-schl.gc.ca/en/15258/15259/15260/15261/15262/15263/15264/15265/15266/15267/15268/15269/15270/15271/15272/15273/15274/15275/15276/15277/15278/15279/15280/15281/15282/15283/15284/15285/15286/15287/15288/15289/15290/15291/15292/15293/15294/15295/15296/15297/15298/15299/15300/15301/15302/15303/15304/15305/15306/15307/15308/15309/15310/15311/15312/15313/15314/15315/15316/15317/15318/15319/15320/15321/15322/15323/15324/15325/15326/15327/15328/15329/15330/15331/15332/15333/15334/15335/15336/15337/15338/15339/15340/15341/15342/15343/15344/15345/15346/15347/15348/15349/15350/15351/15352/15353/15354/15355/15356/15357/15358/15359/15360/15361/15362/15363/15364/15365/15366/15367/15368/15369/15370/15371/15372/15373/15374/15375/15376/15377/15378/15379/15380/15381/15382/15383/15384/15385/15386/15387/15388/15389/15390/15391/15392/15393/15394/15395/15396/15397/15398/15399/15400/15401/15402/15403/15404/15405/15406/15407/15408/15409/15410/15411/15412/15413/15414/15415/15416/15417/15418/15419/15420/15421/15422/15423/15424/15425/15426/15427/15428/15429/15430/15431/15432/15433/15434/15435/15436/15437/15438/15439/15440/15441/15442/15443/15444/15445/15446/15447/15448/15449/15450/15451/15452/15453/15454/15455/15456/15457/15458/15459/15460/15461/15462/15463/15464/15465/15466/15467/15468/15469/15470/15471/15472/15473/15474/15475/15476/15477/15478/15479/15480/15481/15482/15483/15484/15485/15486/15487/15488/15489/15490/15491/15492/15493/15494/15495/15496/15497/15498/15499/15500/15501/15502/15503/15504/15505/15506/15507/15508/15509/15510/15511/15512/15513/15514/15515/15516/15517/15518/15519/15520/15521/15522/15523/15524/15525/15526/15527/15528/15529/15530/15531/15532/15533/15534/15535/15536/15537/15538/15539/15540/15541/15542/15543/15544/15545/15546/15547/15548/15549/15550/15551/15552/15553/15554/15555/15556/15557/15558/15559/15560/15561/15562/15563/15564/15565/15566/15567/15568/15569/15570/15571/15572/15573/15574/15575/15576/15577/15578/15579/15580/15581/15582/15583/15584/15585/15586/15587/15588/15589/15590/15591/15592/15593/15594/15595/15596/15597/15598/15599/15600/15601/15602/15603/15604/15605/15606/15607/15608/15609/15610/15611/15612/15613/15614/15615/15616/15617/15618/15619/15620/15621/15622/15623/15624/15625/15626/15627/15628/15629/15630/15631/15632/15633/15634/15635/15636/15637/15638/15639/15640/15641/15642/15643/15644/15645/15646/15647/15648/15649/15650/15651/15652/15653/15654/15655/15656/15657/15658/15659/15660/15661/15662/15663/15664/15665/15666/15667/15668/15669/15670/15671/15672/15673/15674/15675/15676/15677/15678/15679/15680/15681/15682/15683/15684/15685/15686/15687/15688/15689/15690/15691/15692/15693/15694/15695/15696/15697/15698/15699/15700/15701/15702/15703/15704/15705/15706/15707/15708/15709/15710/15711/15712/15713/15714/15715/15716/15717/15718/15719/15720/15721/15722/15723/15724/15725/15726/15727/15728/15729/15730/15731/15732/15733/15734/15735/15736/15737/15738/15739/15740/15741/15742/15743/15744/15745/15746/15747/15748/15749/15750/15751/15752/15753/15754/15755/15756/15757/15758/15759/15760/15761/15762/15763/15764/15765/15766/15767/15768/15769/15770/15771/15772/15773/15774/15775/15776/15777/15778/15779/15780/15781/15782/15783/15784/15785/15786/15787/15788/15789/15790/15791/15792/15793/15794/15795/15796/15797/15798/15799/15800/15801/15802/15803/15804/15805/15806/15807/15808/15809/15810/15811/15812/15813/15814/15815/15816/15817/15818/15819/15820/15821/15822/15823/15824/15825/15826/15827/15828/15829/15830/15831/15832/15833/15834/15835/15836/15837/15838/15839/15840/15841/15842/15843/15844/15845/15846/15847/15848/15849/15850/15851/15852/15853/15854/15855/15856/15857/15858/15859/15860/15861/15862/15863/15864/15865/15866/15867/15868/15869/15870/15871/15872/15873/15874/15875/15876/15877/15878/15879/15880/15881/15882/15883/15884/15885/15886/15887/15888/15889/15890/15891/15892/15893/15894/15895/15896/15897/15898/15899/15900/15901/15902/15903/15904/15905/15906/15907/15908/15909/15910/15911/15912/15913/15914/15915/15916/15917/15918/15919/15920/15921/15922/15923/15924/15925/15926/15927/15928/15929/15930/15931/15932/15933/15934/15935/15936/15937/15938/15939/15940/15941/15942/15943/15944/15945/15946/15947/15948/15949/15950/15951/15952/15953/15954/15955/15956/15957/15958/15959/15960/15961/15962/15963/15964/15965/15966/15967/15968/15969/15970/15971/15972/15973/15974/15975/15976/15977/15978/15979/15980/15981/15982/15983/15984/15985/15986/15987/15988/15989/15990/15991/15992/15993/15994/15995/15996/15997/15998/15999/16000)



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## INCREASE SUPPORTS TO ADDRESS THE ONGOING SUBSTANCE USE CRISIS

The HSJCC Network understands substance use as referring to the consumption of alcohol, cannabis, opioids, or other drugs. This consumption can be understood on a spectrum, and may lead to overdose, infectious diseases, or other complications. People with substance use issues are over-represented in the criminal justice system due to interconnected individual and societal risk factors, including co-occurring mental health challenges, stigma, poverty, racism, housing instability, and trauma. The mental health and justice sectors also play a critical role, since a lack of appropriate treatment and supports is a crucial factor that can contribute to the over-representation of people with mental health and substance use issues in the criminal justice system.

The HSJCC Network supports a coordinated approach to substance use treatment and support, which includes greater investment in harm reduction programs, the development of drug treatment courts as a holistic approach to health issues rather than a justice response and greater access to high-quality treatment in custody facilities across the province.

Ontario continues to experience a devastating drug poisoning crisis, driven by the fentanyl-dominated unregulated drug supply. Several intersecting factors such as the ever-increasing toxicity of street drugs have contributed to an increasing number of opioid-related overdose deaths. In 2021, 2,907 people died in Ontario as a result of an opioid-related overdose, an increase of nearly 455 deaths over the previous year. Further, there was a 36% increase in hospitalizations due to opioid-related overdoses over 2020<sup>10</sup>.

The COVID-19 pandemic has exacerbated the opioid overdose crisis by intensifying mental health and substance use challenges and limiting access to treatment and harm reduction services. The current context is particularly challenging for individuals released from custody facilities. Evidence indicates that this population is at a higher risk of overdose, death, and other substance-use related harms shortly after release.

**36% increase in hospitalizations due to opioid-related overdoses over 2020<sup>10</sup>**



<sup>10</sup> Public Health Ontario. Online: <https://www.publichealthontario.ca/en/data-and-analysis/substance-use/interactive-opioid-tool#/trends>.

The development and coordination of support services in custody facilities in addition to providing access to low-barrier community-based harm reduction programming upon release from custody are integral to promoting continuity of care. Specifically, greater investments in the following areas are needed:

**In custody:** discharge planning, health education and treatment, and information-sharing on community resources. Ensuring continuity of care for individuals who may have been accessing services before incarceration to ensure access while in custody.

**Post-release:** community programming. Investing in more robust and adaptive community-based harm reduction programs that respond to the changing circumstances experienced by individuals released from custody. Programs should also be accessible prior to any justice involvement.

Community-based harm reduction substance use services provide evidence-based and life-saving interventions that address the heightened risk of substance use related harms for individuals released from custody. Harm reduction programs exist along a broad spectrum of supports, including:

- Opioid agonist treatment
- Rapid access to addiction medicine clinics
- Lower-barrier access to naloxone
- Safe consumption sites
- Outpatient substance-use counseling and supports
- Managed alcohol programs.

Community-based harm reduction programs are currently at various stages of implementation and accessibility across the province. There is an urgent need to scale up efforts in providing harm reduction interventions at all access points, including treatment prior to and during incarceration and facilitating continuity and access to programming upon release from custody.





## INCREASE FUNDING FOR THE HSJCC NETWORK TO SUPPORT NEW AND EXISTING PRIORITIES

Beginning in 2004/2005, the Ministry of Health and Long-Term Care invested \$500,000 in annualized funding for the operations of the entire HSJCC Network. This investment included funding for the 39 Local HSJCCs, the 14 Regional HSJCCs and the P-HSJCC. In 2015, we were delighted to receive additional annualized funding of \$250,000 from the Ministry of Health to establish the HSJCC Secretariat.

The Local and Regional HSJCCs have not received any new funding since the inception of our network. Our network has had to rely on the generosity of our partner agencies to meet the growing demands for service. Many of our member organizations have provided in-kind staffing support, made financial donations, and used funding from their operating budgets to support the important work of the HSJCC Network. With the emergence of new provincial government-led initiatives such as Situation Tables, Community Safety and Well-Being Plans and Communities of Practice that require HSJCC support, we did not receive any new dedicated funding. Regional and Local HSJCCs provide direct services to our priority populations across Ontario. Our committees also play a vital role in education and training for their members, hosting knowledge exchange events, offering training and producing useful resources. These efforts are often done without any additional investments in technology and administrative support.

The HSJCC Network is also committed to improving the meaningful engagement of people with lived experience in our work. Additional funding is required to provide compensation to members with lived experience for their contributions and to ensure that members have the adequate resources to fully participate. Our committees also play a vital role in education and training for their members, hosting knowledge exchange events, offering training and producing useful resources. These efforts are often done without any additional investments in technology and administrative support.

In addition, there is no dedicated funding to provide compensation for the work accomplished by our members on behalf of the HSJCC. Rather, members are either compensated through their respective employers or their time is volunteered to the network. The COVID-19 pandemic reinforced the urgent need to invest in our network. Members are experiencing significant increases in competing priorities, complexities of client needs, stress, fatigue, and burnout, inadequate compensation levels and subsequent issues with staff retention.



The HSJCC Secretariat team has also grown significantly since its inception in 2015. The HSJCC has increased the number of staff responsible for supporting the network and has broadened its areas of scope in support of the growing needs of the network and the populations that our members serve. The Secretariat has also broadened its expertise by leading and coordinating three additional standing committees and communities of practice that provide the knowledge and expert advice to the work of the Provincial HSJCC. The Secretariat has enhanced its capacity to support improved communications and knowledge exchange, strategic policy advice and analysis, membership and engagement through partnerships and project work.

**Our HSJCC Network is requesting a \$500,000 increase to our annualized funding to continue our work at the Local, Regional, and Provincial levels to support Ontarians with mental health issues, substance use concerns and other human service needs that are involved with the justice system.**

**A funding increase is crucial to sustain our existing capacity. We are requesting that 25% of the requested increase (or \$125,000) is dedicated to the HSJCC Secretariat team to support existing workplan priorities and expand future initiatives. This funding would further strengthen the Provincial HSJCC supported by an enhanced Secretariat staff. This funding would provide increased capacity for the Secretariat to develop coordinated public policy responses to emerging trends and issues that may require a response from the Provincial HSJCC. The Secretariat would also have a greater capacity to respond to pressing requests and inquiries as they emerge within the community justice and community mental health sectors. Finally, this funding would allow the Secretariat to better coordinate external relations and represent the Provincial HSJCC as a knowledgeable source of information and a reputable organization for collaborative work. The remaining funds requested would be used to support our work at the Local and Regional levels (60% or \$300,000) and 15% or \$75,000 being allocated for dedicated administrative support, which will increase their capacity to achieve their workplan deliverables.**